## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUL FEE Commissioner for Patents P.O. Box 1450

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

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(Depositor's name (Signat (Date

APPLICATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO FILING DATE 10/553.035 09/22/2006 Vasufiimi Asao 00684 109149 6691 TITLE OF INVENTION: COLOR LIQUID CRYSTAL DISPLAY DEVICE

PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE APPLN, TYPE SMALL ENTITY ISSUE FEE DUE nonprovisional NO \$1440 \$300 \$0 \$1740 05/13/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS	l	
HEALY, BRIAN	2883	349-096000		
<ol> <li>Change of correspondence address or indication (FR 1.363).</li> <li>Change of correspondence address (or Cha Address form PTO/SB/122) attached.</li> <li>Free Address' indication (or "Fee Address' PTO/SB/47; Rev 03-02 or more recent) attach Number is required.</li> </ol>	nge of Correspondence	or agents OR, alternative (2) the name of a single registered attorney or a	3 registered patent attorneys vely, e firm (having as a member a agent) and the names of up to meys or agents. If no name is	1 Fitzpatrick, Cella, Harper & Scinto 2

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CPR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

Canon Kabushiki Kaisha Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🍱 Corporation or other private group entity 🚨 Government

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted:

Issue Fee A check is enclosed.

Publication Fee (No small entity discount perm Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-1205 (enclose an extra copy of this form). Advance Order - # of Copies

5. Change in Entity Status (from status indicated above)

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Variel Alved March 7, 2008 Date Authorized Signature Daniel S. Glueck-37,838 Typed or printed name Registration No.

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